C-2 Rev. 04/04



CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

ection 1				
Name of Candidate or Political Committee and Chairperson			Office Sought (if c	andidate) District (if any)
Mailing Address	☐ Check if address change.	City and Zip	Home Phone	Work Phone
Name of Political Treasurer				
Mailing Address	☐ Check if address change.	City and Zip	Home Phone	Work Phone
Section II				
Directions: To indicate the instructional manual for rep	type of report being filed, orting periods and due dat is for the period from _	tes.	dates and check the appro	
☐ 7 Day Pre-Primary	_	30 Day Post-Primary R	_	ober 10 Pre-General Report
☐ 7 Day Pre-General	Report	30 Day Post-General Re	eport	ual Report
☐ Semi-Annual Repo	ort (Statewide Candidates	Only)		
Is this Report ar	n amendment?		is a Termination Report?	
Section III	STATEMENT OF N	O CONTRIBUTION	S OR EXPENDITURE	ES
Section IV.	hat I have received no cor	ntributions and have ma		
Section IV		SUMMARY		
To reach your Calendar Year to Date figure: Add this report's Column I figures to the Column II figures of your previous report (except on line 6).			COLUMN I COLUMN II This Period Calendar Year to Date	
Line 1: Cash on Hand January 1, This Year*			\$_XXXXXX	\$
Line 2: Enter Cash Balance at Close of Last Reporting Period**			\$	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)			\$	\$
Line 4: Subtotal (Add lines 1, 2 and 3)			\$	\$
Line 5: Total Expenditures (Enter amount from page 2)			\$	\$
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**			\$	\$
Line 7: Outstanding Debt to Date			\$	
*This same figure should be **You must report the cash Note that the closing cash b	on hand at both the begin	ning of the reporting po	eriod and the close of the	
D	Section V CERTIFICATION			
Return This Report To: Ben Ysursa	I			
Secretary of State				
PO Box 83720 Boise ID 83720-0080				
phone: (208) 334-2852 fax: (208) 334-2282				
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